


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000012446 1. Entity Name CHARLES R. WILLS JR. LLC	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 OCT -3 AM 11:48

Principal Place of Business 110 N.E. 12TH TERRACE #2 OCALA, FL 34470	Mailing Address 110 N.E. 12TH TERRACE #2 OCALA, FL 34470
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07122008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0830383	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

WILLS, CHARLES R JR.
 110 N.E. 12TH TERRACE #2
 OCALA, FL 34470

DO NOT WRITE
 IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75
 Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	WILLS, CHARLES R JR.
STREET ADDRESS	110 N.E. 12TH TERRACE #2
CITY-ST-ZIP	OCALA, FL 34470
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 10/02/08--01040--001 **138.75

DO NOT WRITE
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REINSTATEMENT *2008*

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Charles R. Wills Jr.* **Charles R.** *9-11-08* *352-207-5096*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

managing Member